

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL070008</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>12/09/2015</b>
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NAME OF PROVIDER OR SUPPLIER  <b>WATERBROOKE OF ELIZABETH CITY</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>143 ROSEDALE DRIVE ELIZABETH CITY, NC 27909</b>
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C 000	Initial Comments  Report of a Biennial Survey by Billy S. Bryant and Greg Cates conducted on 12/09/2015.  Records indicate this facility was first licensed on 01/28/1997. The facility is currently licensed for 130 Beds with a 26 Bed Special Care Unit. Therefore the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1996 (1997 Revision) Edition of the North Carolina Building Code(s), Institutional Occupancy and the 1996 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure.	C 000		
C 153	Exit Door Locks-Single Hand Motion  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (h) The requirements for outside entrances and exits are: (3) All exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys; and  This Rule is not met as evidenced by: 1. Based on observation the not all exit door locks are not operable by a single hand motion. Some doors had more that one set of locking hardware or the hardware required to hand motions to unlock. This could effect occupants if the facility by delaying exiting from the rooms in the event of an emergency situation.  Findings 12/09/2015:	C 153	C153 a, b,c Kitchen door to dining area and dining room door hardware were replaced with single motion knobs  SCU dining door to corridor hardware was replaced with single motion knob.	1/18/16  1/19/16

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*DR Smith*

TITLE  
Administrator

(X6) DATE  
1/19/16

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C 153	Continued From page 1  a. Kitchen Door to Dining Area - There are two sets of hardware on the door requiring at least two and hand motions and possible three if both are engaged in order to unlock to exit.  b. Dining Room - The hardware on the doors to the corridor requires two hand motions to unlock to exit.  c. Special Care Dining Room - The hardware on the door to the corridor requires two hand motions to unlock to exit.	C 153		
C 164	Housekeeping and Furnishings-Clean, Repaired  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities.  This Rule is not met as evidenced by: 1. Based on observation the facility failed to keep walls, ceilings and doors clean and in good repair as evidenced but not limited to the examples listed in the findings:  Findings on 12/09/2015: a. Beauty Shop - The ceiling paint is peeling.  b. Room - 34 - Ceiling is stained and the wall is cuffed and marred.  c. Community Shower Adjacent to Room #26 -	C 164	C164 a. Beauty shop ceiling repaired and repainted  b. Room 34 ceiling repaired and repainted  c. Door Stile filled with wood fill	1/19/16  1/18/16  12/18/15



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<p>C 164 Continued From page 2</p> <p>The lock side door stile is split.</p> <p>d. Med Room Across from the Dining Room - The door has surface damage.</p> <p>e. Medicine Room Door - The door has surface damage.</p> <p>f. Smoking Porch - The ceiling is detaching from the joists.</p> <p>g. Special Care Unit - The corridor ceiling is damaged due to damage from a water leak.</p> <p>h. Pattern of ceiling HVAC Grilles and the radiation dampers above the grilles clogged with dust.</p>	<p>C 164</p>	<p>and replaced latch door reinforcer 12/18/15</p> <p>d. Med Room door surface sanded, filled with wood fill and stained 12/15/15</p> <p>e. Med Room door surface filled with wood fill and stained 12/15/15</p> <p>f. Smoke porch ceiling repaired and replaced old screws with new screws to re-attach 12/21/15</p> <p>g. Insurance Claim in process - ceiling pipes repaired/replaced and all painting and fixtures to be repaired and replaced by 2/1/2016 ** 2/1/16</p>
<p>C 166 Housekeeping-Maintained Free of Hazards</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS</p> <p>(a) Adult care homes shall:</p> <p>(5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards;</p> <p>(e) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation the facility is not free from hazards. Loose, detached or raised exterior surface materials are in the exit path from and exit door. Loose, detached or raised exterior surface materials in the exit path from and exit door could present a tripping hazard to occupants using the exit path.</p>	<p>C 166</p>	<p>h. HVAC grilles have been dusted and cleaned 12/14/15</p> <p>C168</p> <p>1. 1/15/16</p> <p>a.SCU patio tiles re-attached with marine adhesive (will also re-grout when temps rise above 50 degrees)</p> <p>2.</p> <p>a.PPE Closet - Oxygen tanks restrained in storage rack 12/10/16</p> <p>(Medi-Home Care delivered new racks)</p>

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C 166	<p>Continued From page 3</p> <p>Finding on 12/09/2015:</p> <p>a. Special Care Unit Patio - There are tiles on the patio surface in the exit path that have become detached from the subsurface, are loose and/or raised above the horizontal plane of the patio.</p> <p>2. Based on observation the storage of oxygen bottles was not maintained in a manner that kept the facility free from hazards. Oxygen bottles that are not stored in an oxygen bottle rack or otherwise restrained from falling or being knocked over may present a danger to the occupants of the facility.</p> <p>Finding on 12/09/2015</p> <p>a. PPE Closet -Oxygen cylinders were found stored sitting upright and without any restraining device, storage racks or compartments.</p> <p>3. Based on observation the facility is not maintained free from hazards. The building code required clearance for electrical equipment must not be encroached upon. Obstructing access to electrical equipment could prevent quick operation if needed for an emergency situations.</p> <p>Finding on 12/09/2015:</p> <p>a. Kitchen Electrical Room- Electrical panel access is obstructed.</p> <p>4. Based on observation there is a failure to install and maintain plumbing piping in a safe condition. Failure to maintain or install plumbing piping in a safe condition could effect all occupants of the facility if because of the unsafe condition the domestic water supply became contaminated.</p> <p>Finding on 12/09/2015:</p> <p>a. Kitchen - The ice machine drain does not have</p>	C 166	<p>3.</p> <p>a. Remove obstacle and cleared path</p> <p>4.</p> <p>a. Lifted ice machine with 3 inch salt treated 4x4 to provide clearance acceptable to code</p>	12/9/15	1/12/16





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C 174	Continued From page 5  assistance. Note: Removed while surveyor was on site.	C 174			
C 175	Bedroom Furnishings-Clean Towel, Towel Bar  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (7) individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and (e) This Rule shall apply to new and existing facilities.  This Rule is not met as evidenced by: 1. Based on observation the facility has failed to provide individual bathroom furnishings by not having the required quantity of furnishings for each room resident.  Finding on 12/09/2015: a. There is not an individual towel rack for each resident using the shared resident room bathrooms.	C 175	C175 1. a.All resident bathrooms will have new individual towel hooks	1/30/16	
C 184	Fire Safety-Evacuation plan  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (a) A written fire evacuation plan (including a diagrammed drawing) which has the written approval of the local Code Enforcement Official shall be prepared in large print and posted in a central location on each floor of an adult care home. The plan shall be reviewed with each resident on admission and shall be a part of the	C 184	C184 1. a. Central corridor will re-post evacuation plan - picture frame to be replaced	1/22/16	



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C 184	Continued From page 6  orientation for all new staff. (f) This Rule shall apply to new and existing facilities.  This Rule is not met as evidenced by: 1. Based on observation the facility failed to provide in a central location a diagrammed drawing approved by the local code official showing in large print the evacuation routes from the a potion of the building. This could affect occupants of the building seeking information on evacuation of the building in the event of an emergency.  Finding on 12/09/2015: a. There is not an evacuation plan showing evacuation routes posted for the central corridor area of the building.	C 184		
C 189	Building Equipment Maintained Safe, Operating  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.  This Rule is not met as evidenced by: 1. Based on observation and testing there is failure to maintain the facility's emergency fire alarm system devices and equipment in a safe operating condition. Failure to maintain fire alarm system devices and equipment in a safe and	C 189	C189 1. a/b. Due to damage to system from 1/6/16 leak and panel malfunction, Sentry Security had to repair and replace access control power supply/relay which controls the release of the magnetic locks. Staff were aware and check all rooms and fire exits during each shift. All repairs were completed January 6th and confirmation letter received January 8th. Letter attached.	

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C 189	Continued From page 7  operable condition could effect all occupants of the facility if the equipment did not function when and as required.  Findings on 12/09/2015: a. The magnetic locks on the facility exit doors did not de-energize and release upon activation of the fire alarm.  b. When activated the central or master override switches did not de-energize the magnetic door locks.  2. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition as evidenced by doors that do not completely close and latch. Doors are required to completely close and latch in the event of a fire in order to resist the passage of smoke or the spread of fire. All the occupants in the facility could be effected if doors do not latch and remain closed so as to limit the spread of smoke or fire to the area of origin.  Findings on 12/09/2015: a. Special Care Unit - The cross corridor doors adjacent to Room #9 - One leaf of the double doors is dragging on the floor and will not close. The door also did not release from its magnetic hold open device upon activation of the fire alarm system.  b. There is a pattern of cross corridor doors that do not completely close and latch.  3. Based on observation there is a failure to maintain the facility's fire safety systems in a safe manner as evidenced by gaps and open penetrations in the fire resistant rated ceilings. Fire resistant rated ceilings must be free of gaps	C 189	2. a. SCU cross corridor doors were repaired by lifting Mag locks (see above)  b. Cross corridor doors tightened  3. a. Kitchen electrical room pipe sleeve with data cabling sealed with fire-rated caulk sealant	1/13/16  1/13/16  1/13/16



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C 189	Continued From page 8  and openings in order to resist the spread of fire and smoke in the event of a fire. Penetrations or holes in fire resistant rated ceilings could effect the occupants of the facility by allowing fire and smoke to spread beyond the area of origin.  Finding on 12/09/2015: a. Kitchen Electrical Room - There is an open ended pipe sleeve for the data cabling that penetrates the 1 hr. fire resistant rated ceiling.	C 189		